

02-28-07  
**PART B - FEE(S) TRANSMITTAL**

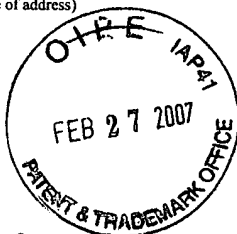
**Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590 12/01/2006  
Finnegan, Henderson, Farabow  
Garrett & Dummer, L.L.P.  
1300 I Street, N.W.  
Washington, DC 20005-3315

Mintz, Levin, Cohn, Ferris, Glovsky and Popeo, PC  
9255 Towne Centre Drive, Suite 600  
San Diego, CA 92121



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

|                          |                    |
|--------------------------|--------------------|
| <b>Teri Barnett</b>      | (Depositor's name) |
| <i>Teri Barnett</i>      | (Signature)        |
| <b>February 27, 2007</b> | (Date)             |

|                 |             |                      |                     |                  |
|-----------------|-------------|----------------------|---------------------|------------------|
| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|

|            |            |             |               |      |
|------------|------------|-------------|---------------|------|
| 09/987,356 | 11/14/2001 | Stefan Hack | 07781-0013-01 | 6942 |
|------------|------------|-------------|---------------|------|

TITLE OF INVENTION: VALUE CHAIN OPTIMIZATION SYSTEM AND METHOD

**34874-268CON**

02/28/2007 BABRAHA2 00000012 09987356

| APPLN. TYPE    | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE   |
|----------------|--------------|---------------|---------------------|-----------|------------------|------------|
| nonprovisional | NO           | \$1400        | \$300               | \$0       | \$1700           | 03/01/2007 |

| EXAMINER             | ART UNIT | CLASS-SUBCLASS |
|----------------------|----------|----------------|
| STERRETT, JONATHAN G | 3623     | 705-007000     |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. **Use of a Customer Number is required.**

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

**1 Mintz, Levin, Cohn,**  
**2 Ferris, Glovsky and**  
**3 Popeo, P.C.**

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

**SAP AG**

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**Walldorf, Germany**

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies **10**

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- ☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number **50-0511** (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature *Carl A. Kukkonen*  
Typed or printed name **Carl A. Kukkonen, III**

Date **February 27, 2007**  
Registration No. **42,773**

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